017 E AUG 1 1 2008

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Blum		10/716.825			
				Application (value)		November 18, 2003			
FEE TRANSMITTAL				· · · · · · · · · · · · · · · · · · ·		Gregory Stephanopoulos			
For FY 2008				Examiner Name	entor	A. D. Steele			
Applicant claims small entity status. See 37 CFR 1.27						1639			
TOTAL AMOUNT OF PAYME		(\$) 465.00		Attorney Docket	No.	MIN-P01-042			
_ 				7 Morriey Beenet					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP									
For the above-ident	ified deposit	t account, the Dir	ector is	hereby authorize	ed to: (che	eck all that apply)			
x Charge fee(s)	indicated b	elow		Charg	e fee(s) ir	ndicated below, ex	xcept for th	e filing fee	
Charge any a		(s) or underpayn	nents o	f x Credit	any over	payments			
FEE CALCULATION	17 CH 1.10	and 1.17							
1. BASIC FILING, SEARCH	AND EXA	MINATION FEE	<u>s</u>		-	***	_		
1. BASIC FILING, SEARCI		NG FEES		ARCH FEES	EXAMI	NATION FEES			
		Small Entity	F (0	Small Entity	Fac. (\$)	Small Entity	Fees P	aid (\$)	
Application Type	Fee (\$)	Fee (\$)	Fee (\$) <u>Fee (\$)</u> 255	Fee (\$)	Fee (\$) 105	rees r	alu (a)	
Utility	310 210	155 105	100	50	130	65			
Design Plant	210	105	310	155	160	80			
Reissue	310	155	510	255	620	310			
Provisional	210	105	0	0	020	0			
2. EXCESS CLAIM FEES	210	105	Ū	v	v	Ť		Small Entity	
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (includ	ing Reissue	s)					50	25	
Each independent claim ov	er 3 (includ	ing Reissues)					210	105	
Multiple dependent claims							370	185	
Total Claims Extra	Claims	Fee (\$)	Fee	Paid (\$)	_	Multiple Depende			
- 20 = HP = highest number of total cla	X	greater than 20			E	ee (\$)	Fee Paid (\$)	i	
	Claims	Fee (\$)	Fee	Paid (\$)				_	
-3=	x	=		(4)					
HP = highest number of indeper	ident claims pa	aid for, if greater than	3.						
3. APPLICATION SIZE FE									
If the specification and dr	awings exce	eed 100 sheets o	f paper	(excluding electr	onically	filed sequence or	computer	1	
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
	xtra Sheets	<u>Number o</u>	f each a	additional 50 or fra			Fee F	Paid (\$)	
		/50 =		(round up to a whe	ole number	r) ×	=	Doid (f)	
4. OTHER FEE(S)	· 6120 A	(ie. diaa	.aumt)			rees	Paid (\$)	
Non-English Specificat Other (e.g., late filing s		2251 Extension	ity disc	sponse within fi	rst mont	h	60	0.00	
Other (e.g., late filing s	urcharge).	2801 Request f	or con	tinued examina	tion (RC	E) (see 37	40	5.00	
SUBMITTED BY	Λ_{\circ}								
Signature		5		Registration No. (Attorney/Agent)	54,144	Telephone	(617) 95°	1-7546	
Name (Print/Type) Z. Angel	Guo, Ph.	D.		7 9 7		Date	August 7	, 2008	
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						ing doppoledth. 1	ho 11 S C4-1	Sandas ==	
I hereby certify that this pape the date shown below with su 1450. Alexandria VA 22313	ifficient posta	any paper referred t ge as First Class M	o as bei ail, in ar	ng aπacned or enck ι envelope addresse	used) is be ed to: MS F	ing deposited with the RCE, Commissioner	for Patents, F	P.O. Box	

Dated: Aug . 7, 2 w8	Signature: Elaine Loang	(Elaine Lewhy)



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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008			Complete if Known				
			Application Number 10/716,825				
			Filing Date		November 18, 2003		
			First Named Inv		Gregory Stephanopoulos		
<u> </u>	1 200		Examiner Name		D. Steele		
x Applicant claims small	entity status.	See 37 CFR 1.27	Art Unit		39		
TOTAL AMOUNT OF PAYMEN	ıτ	(\$) 465.00	Attorney Docket	No. M	IN-P01-042		
METHOD OF PAYMENT	(check all	that apply)					
Check Credit Card Money Order Other (please identify): Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP							
For the above-identi	fied deposit	account, the Director i	s hereby authorize	ed to: (check	all that apply)		
X Charge fee(s)			Charg	e fee(s) indic	cated below, ex	cept for th	e filing fee
Charge any ac	ditional fee	(s) or underpayments of	of X Credit	any overpay	ments		ŀ
fee(s) under 3	7 CFR 1.16	and 1.17					
FEE CALCULATION		MINIATION SEES		_			
1. BASIC FILING, SEARCH			ARCH FEES	EXAMINA	ATION FEES		
		Small Entity	Small Entity	Eng (\$)	Small Entity	Fees P	aid (\$)
Application Type	Fee (\$)	Fee (\$) Fee (\$		<u>Fee (\$)</u> 210	<u>Fee (\$)</u> 105	1 003 1	<u>uiu (ψ)</u>
Utility	310	155 510 105 100		130	65		
Design	210			160	80		
Plant	210	105 310 155 510		620	310		
Reissue	310	105 0		020	0		
Provisional	210	103 0	· ·	v	J		Small Entity
2. EXCESS CLAIM FEES						Fee (\$)	Fee (\$)
Fee Description Each claim over 20 (include	ing Reissue	s)				50	25
Each independent claim over						210	105
Multiple dependent claims	`					370	185
• •	Claims	Fee (\$) Fee	Paid (\$)	<u>Mu</u>	Itiple Depende		
- 20 =	х	=		<u>Fee</u>	<u>: (\$)</u> <u> </u>	Fee Paid (\$)
HP = highest number of total cla	ims paid for, if						_
<u></u>	Claims	Fee (\$) = Fee	Paid (\$)				
- 3 = HP = highest number of indepen	X ident claims oa						
2 ADDITION SIZE EE	=						
If the enecification and dr	awings exc	eed 100 sheets of pape	r (excluding elect	ronically file	ed sequence or	computer	0
listings under 37 CFR sheets or fraction there	1.52(e)), th	e application size fee of	d 37 CFR 1.16(s).		iity) ioi cacii a	darrionar 5	•
	xtra Sheets	Number of each	additional 50 or fra	ction thereof	Fee (\$)	Fee	Paid (\$)
- 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)						<u>Fees</u>	Paid (\$)
Non-English Specificat	ion, \$130	fee (no small entity dis	scount)	firet month		6	0.00
Other (e.g., late filing surcharge): 2251 Extension for response within first month 2801 Request for continued examination (RCE) (see 37 405.00							
							
SUBMITTED BY	/	5	Registration No.	54,144	Telephone	(617) 95	1-7546
Signature	Sup Db		(Attorney/Agent)		Date	August	7. 2008
Name (Print/Type) Z. Angelà Guo, Ph.D. Date August 7, 2008							
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box							
1450, Alexandria, VA 22313-1450.							
Dated: A44 . 7, 2	wo	Signature:	orne Seal	14	(Blaine	LOUNY	J